

# Substance Use Among Women: Associations with Pregnancy, Parenting, and Race/Ethnicity

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**Abstract** *Objective* To examine the association of pregnancy and parenting (0- to 2-year-old child) statuses with past 30-day use of alcohol, cigarettes and marijuana, psychotherapeutics and cocaine among American women aged 18–44, overall and by race/ethnicity. *Methods* Five years of data (2002–2006) from the National Survey on Drug Use and Health (NSDUH) were pooled. Binary logistic regression analyses stratified by race/ethnicity were performed to examine the relationships adjusting for age, marital status, education and family income. *Results* Overall, past 30-day alcohol, cigarette, marijuana, psychotherapeutic or cocaine use was substantially lower among pregnant women, particularly in their second or third trimesters, than among their parenting or non-pregnant counterparts. Logistic regression analysis suggested a strong negative association between pregnancy status and substance use, with no considerable variations in the magnitude of the relationship by race/ethnicity for most measures. The relationship between parenting status and substance use was in the same direction, but relatively weak, and not statistically significant for non-Hispanic (NH) blacks for any measures except for alcohol use. Regardless of pregnancy and parenting statuses, NH white women reported substance use at the

highest rates, followed by Hispanics and NH blacks. *Conclusions* There is indirect evidence of postpregnancy resumption in substance use. Pregnant and parenting women, regardless of race/ethnicity, could benefit from prevention efforts focusing on cessation rather than temporary abstinence from substance use.

**Keywords** Substance use · Alcohol · Cigarettes · Marijuana, Psychotherapeutics · Cocaine · Pregnancy · Parenting · Race/ethnicity

## Introduction

In the United States (US), substance use among women who are pregnant or parenting young children has remained a public health concern. Prenatal alcohol, cigarette and illicit drug use have been shown to be associated with poor pregnancy and neonatal outcomes [1–9] as well as behavioral and developmental problems at early childhood [10–12]. Parental smoking through environmental tobacco exposure has been linked to respiratory problems in children [13, 14]. Children of mothers abusing alcohol and illicit drugs are likely to be at increased risk of long-term physical, cognitive, behavioral and academic problems including their own substance use [15, 16]. Substance abuse by parents of young children has been linked to impaired parenting capacity [17] and child abuse and neglect [18–21].

Prevalence estimates of substance use during pregnancy vary depending on the population sampled, the exposure interval of pregnancy covered and the reference period used in prevalence measures [22, 23]. Despite these differences, previous studies have consistently shown that women reduce their substance use after becoming pregnant. The

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